

FEE TRANSMITTAL for FY 2005 <small>Effective 10/01/2004. Patent fees are subject to annual revision.</small>		Complete if Known																																											
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/747,100-Conf. #1500																																										
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	December 21, 2000																																										
980.00		First Named Inventor	Michael Osterer																																										
		Examiner Name	A. L. Enatsky																																										
		Art Unit	3713																																										
		Attorney Docket No.	07415/000G540-US0																																										
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																											
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																											
<input type="checkbox"/> Deposit Account: Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.																																													
The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																													
FEE CALCULATION																																													
1. BASIC FILING FEE																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>2001</td><td>790</td><td>395</td><td>Utility filing fee</td><td></td></tr><tr><td>1002</td><td>2002</td><td>350</td><td>175</td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>2003</td><td>550</td><td>275</td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>2004</td><td>790</td><td>395</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>2005</td><td>160</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1001	2001	790	395	Utility filing fee		1002	2002	350	175	Design filing fee		1003	2003	550	275	Plant filing fee		1004	2004	790	395	Reissue filing fee		1005	2005	160	80	Provisional filing fee		SUBTOTAL (1)					0.00		
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid																																								
1001	2001	790	395	Utility filing fee																																									
1002	2002	350	175	Design filing fee																																									
1003	2003	550	275	Plant filing fee																																									
1004	2004	790	395	Reissue filing fee																																									
1005	2005	160	80	Provisional filing fee																																									
SUBTOTAL (1)					0.00																																								
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																													
Total Claims 20 -20** = <input type="text"/> x <input type="text"/> = 0.00																																													
Independent Claims 2 -3** = <input type="text"/> x <input type="text"/> = 0.00																																													
Multiple Dependent <input type="text"/> = <input type="text"/>																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202</td><td>2202</td><td>18</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>2201</td><td>88</td><td>44</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>2203</td><td>300</td><td>150</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>2204</td><td>88</td><td>44</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>2205</td><td>18</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5">SUBTOTAL (2)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid	1202	2202	18	9	Claims in excess of 20		1201	2201	88	44	Independent claims in excess of 3		1203	2203	300	150	Multiple dependent claim, if not paid		1204	2204	88	44	** Reissue independent claims over original patent		1205	2205	18	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					0.00		
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid																																								
1202	2202	18	9	Claims in excess of 20																																									
1201	2201	88	44	Independent claims in excess of 3																																									
1203	2203	300	150	Multiple dependent claim, if not paid																																									
1204	2204	88	44	** Reissue independent claims over original patent																																									
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent																																									
SUBTOTAL (2)					0.00																																								
**or number previously paid, if greater; For Reissues, see above																																													
SUBMITTED BY		(Complete if applicable)																																											
Name (Print/Type) Richard J. Katz		Registration No. (Attorney/Agent) 47,698	Telephone (212) 527-7700																																										
Signature		Date	November 12, 2004																																										



Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. _____ in an envelope addressed to:

382050684

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on November 12, 2004
Date

A. Stantini

Signature

A. Stantini

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Amendment After Final Action (37 C.F.R. Section 1.116) (14 pages)

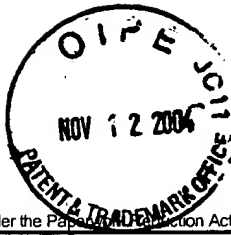
Amendment Transmittal (1 page)

Transmittal (1 page)

Conditional Notice of Appeal (1 page)

Check in the amount of \$980.00 **#6697**

Return receipt postcard



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/747,100-Conf. #1500
	Filing Date	December 21, 2000
	First Named Inventor	Michael Osterer
	Art Unit	3713
	Examiner Name	A. L. Enatsky
Total Number of Pages in This Submission	Attorney Docket Number	07415/000G540-US0

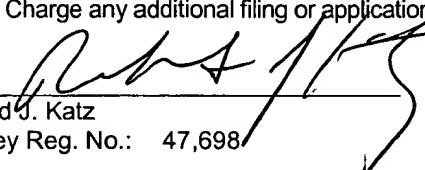
ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Conditional Notice of Appeal Return Receipt Postcard Certificate of Express Mailing
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Richard J. Katz		
Date	November 12, 2004	Reg. No.	47,698



AMENDMENT TRANSMITTAL LETTER			Docket No. 07415/000G540-US0	
Application No. 09/747,100-Conf. #1500	Filing Date December 21, 2000	Examiner A. L. Enatsky	Art Unit 3713	
Applicant(s): Michael Osterer				
Invention: INTERNET GAMING SYSTEM				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	20	- 20 =		x
Independent Claims	2	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within third month				980.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				980.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> A check in the amount of \$ 980.00 to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
<div style="text-align: center;"> Richard J. Katz Attorney Reg. No.: 47,698</div>			Dated: November 12, 2004	
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7717				



{W:\07415\000g540us0\00299898.DOC }